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## RUBAL AREAS TO CET HORE HOSPITALS

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One of the shief methods whereby the medical service to people living in kolkhozes, sovkhozes and Mrss can be improved is by increased construction of hospitals and medical institutions. However, for one reason or another, this construction program has been lagging. In many cases materials have been rade available, but have not been utilized.

The building program in Tedzhik SSR and Mazakh SSR is particularly open to criticism. In 1948 the Ministry of Realth REFSR appropriated money and materials for 122 projects. The results are very unsctis-factory. Fineteen projects started in 1946 are still not completed. Also uncompleted are 60 projects started in 1947 and 30 projects started in 1948.

The 1949 program for the building of rural medical facilities was discussed at a recent meeting of the Ministry of Esalth RSFSR. The most important item was the estallishment of complete medical facilities in each rural community. Every rayou center is to have its own hosrital and polyclinic.

It is heartening to note, however, that many of the local health agencies are operating much more efficiently than the contral agency.
For example, the local health department of Zhitchir Oblast, Ukrainian
SSR, has made an excellent showing. Local health and construction agencies in Bryangk Oblast should also be praised. Here personal initiative accomplished the following in 1948: ten hospitals with a total of 614 beds, two smbulatory dispensaries, and three midwife and obstetrical stations. Communal farmers in regions surrounding the oblast center medical establishment have also been active in improving their own medical facilities. They have completed accommodations for

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200 hospital beds, two ambulatory 11 pensaries, and three midwife and obstetrical stations. Space for an additional 214 hospital beds is 60 - 80 percent completed. The local Farty committee for Bryansk has approved a comprehensive construction program for 1949, wherein construction will be accomplished on a cooperative basis. In 1949 the peoples of this oblast intend to complete the various projects still outstanding from 1948 and to build 19 hospitals with a total of 490 beds and 22 midwife and obstetrical stations.

Much of the initative responsible for the great local construction activity is due to individual doctors and small party organizations. For example, in Karachevsk Rayon Dr Mikol'skaya, a pediatrician, who is primarily responsible for the construction of a 500,000-ruble, 50-bed rayon hospital. In Dyat'kov Rayon, Dr S. M. Anokhin is responsible for the construction of a rayon hospital. The tasks of these loyal Soviet citizens are not without difficulty; for example, Dr Ye. K. Zubkov of Krasnogorod Rayon had to organize special field trips to obtain 250 cubic meters of wood from a stand of lumber 150 kilometers away.

The cooperative building plan is gaining more followers everyday. It is a heart warming display of national spirit, but it certainly puts responsible agencies in a bed light.

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